



Application Data Sheet

Application Information

Application number::	10773767
Filing Date::	02/06/04
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R??::	
Number of CD disks::	
Number of copies of CDs::	
Sequence Submission::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	DRUG MODEL EXPLORER
Attorney Docket Number::	021720-001310US
Request for Early Publication::	No
Request for Non-Publication::	Yes
Suggested Drawing Figure::	
Total Drawing Sheets::	25
Small Entity?::	Yes
Latin name::	
Variety denomination name::	
Petition included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers One::	
Secrecy Order in Parent Appl.::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Netherlands
Status:: Full Capacity
Given Name:: Jacob
Middle Name:: W.
Family Name:: Mandema
Name Suffix::
City of Residence:: Atherton
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 191 Selby Lane
City of Mailing Address:: Atherton
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94027

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Michael
Middle Name:: J.
Family Name:: Schwartz
Name Suffix::
City of Residence:: Mill Valley
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 238 California Avenue
City of Mailing Address:: Mill Valley
State or Province of mailing address:: CA

Country of mailing address:: US
Postal or Zip Code of mailing address:: 94941

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Timothy
Middle Name:: Matthew
Family Name:: Sheiner
Name Suffix::
City of Residence:: San Francisco
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 1760 Alabama Street
City of Mailing Address:: San Francisco
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94110

Applicant Authority Type:: Inventor
Primary Citizenship Country:: France
Status:: Full Capacity
Given Name:: Jean-Max
Middle Name::
Family Name:: Vally
Name Suffix::
City of Residence:: San Francisco
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 171 Capistrano Avenue
City of Mailing Address:: San Francisco

State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94112

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An Appn claiming benefit under 35 USC 119(e) of	60/511,602	10/14/03

Foreign Priority Information

Country::	Application number::	Filing Date::
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Assignee Information

Assignee Name:: Pharsight Corporation
Street of mailing address:: 800 W. El Camino Real, Suite 200
City of mailing address:: Mountain View
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94040